



Richland County Business Service Center

2020 Hampton Street, Suite 1050
P.O. Box 192
Columbia, SC 29202

Phone: (803) 576-2287
Fax: (803) 576-2289
bsc@rcgov.us
<http://www.rcgov.us/bsc>

CLOSING BUSINESS FORM

For businesses no longer located in *or* doing business in Richland County

Thank you for doing business in Richland County. We appreciate your contribution to the community. Please be sure to complete this form so we may update the County's records.

- **Be sure to also notify the State DOR Registration Dept. at 803-896-1350 of your closing.**
- **A final Business Personal Property Tax bill will be sent to you next year, as these taxes are paid in arrears.** This bill is required to be paid.
- **Any delinquent taxes and fees due at the time of closing still need to be paid.** Failure to pay will result in further enforcement efforts.

Business Information

1. Business Name _____
2. Doing Business As (if applicable) _____
3. Federal ID # or SSN _____ Owner Name: _____
4. Date Business Started _____ Date Business Closed _____
5. Business Location _____

Type of Closing – Please select the most appropriate answer for your circumstances.

- ☐ Shut Down – no longer doing business at all
- ☐ Sold – sold the business to another owner: please complete section below
- ☐ Moved – no longer physically located in Richland County's unincorporated areas
- ☐ Downsized – no longer doing business in Richland County's unincorporated areas
- ☐ Address Correction – not located in Richland County's unincorporated areas
- ☐ Other (Describe) _____

If the business was sold, please complete the section below:

New Owner's Name _____

New Owner's Phone Number _____ E-mail: _____

Mailing address _____

Sale date _____

Cause of Closing – Please select the most appropriate answer for your circumstances.

- ☐ Financial difficulties/bankruptcy
- ☐ Not interested in keeping business open
- ☐ Personal reasons
- ☐ Annexation (month/year _____)
- ☐ Better business environment in new location
- ☐ Other (Describe) _____

County Accounts to be Closed – Please indicate which account numbers your business had:

- ☐ Business License (Business License # _____)
- ☐ Business Personal Property Taxes* (Account # _____)
- ☐ Hospitality Taxes (Hospitality Tax # _____)
- ☐ Hazardous Materials Permit (Permit # _____)
- ☐ Precious Metals Permit ☐ Landfill Permit
- ☐ Other (Describe) _____

Notifying Person's Information

Name _____ Date _____

Signature _____ Title _____

Relationship to Business (owner, agent, etc.) _____

Signature of BSC staff: _____ Date: _____